

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LM-G		11/21/00
O.I.P.E. CLASSIFIER		15	128 CO
FORMALITY REVIEW	YC	70017	2-7-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date		
Final	5	10	11
Original	15	11	5
	19	86	10
	02	03	14
	03	03	01
	04		
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
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Claim	Date		
Final	51		
Original	52		
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Claim	Date		
Final	101		
Original	102		
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If more than 150 claims or 10 actions  
staple additional sheet here

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